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(Re	equestor's Name)	
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(Cit	ty/State/Zip/Phone	e #)
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(Bu	isiness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
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RIA Cray

MAY 16 2014

R. WHITE

COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT. H & H Bronze Co. Inc.

Name of Corporation

DOCUMENT NUMBER: P98000043999

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Nancy Wallace

Name of Contact Person

H & H Bronze Co. Inc.

Firm/Company

2012 SE 9th Terrace

Address

Cape Coral, FL 33990

City/State and Zip Code

Hammer11529@yahoo.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Nancy Wallace

.,239

458-1410

Name of Contact Person

Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of change	isions of sections 607.0502, 617.0502, is submitted for a corporation organiz	ed under the lav	vs of the State of Flo	rida	
	change its registered office or register	-	h, in the State of Flor	rida.	
1. The name of the co	orporation: H & H Bronze Co. I	nc.			
2. The principal office Cape Coral,	ce address: 2012 SE 9th Terrac FL 33990	e			
3. The mailing addre	ess (if different):				
4. Date of incorporat	tion/qualification: May 13, 1998	Document i	number: P980000	43999	
	eet address of the current registered age nt of State: (If resigned, enter resigned	-	ed office on file with t	the	
Re	enee Wambold	·			
16	50 E. Lake Mary Blvd.		;	संक्र →	
Sa	Sanford, FL 32773				
6. The name and stre (if changed):	eet address of the new registered agent			1111 D	FILED
<u>Na</u>	ancy Wallace				\Box
20	12 SE 9th Terrace	<u>.</u> .			
Ca	PO Box NOT at appe Coral, FL 33990	cceptable			
The street address o as changed will be i	of its registered office and the street ac				t,
Thurer	Ture Strellace James Shelton Wallace				
I hereby accept the I further agree to co performance of my agent. Or, if this do	an officer or director appointment as registered agent and omply with the provisions of all statut duties, and I am familiar with and according to reflect the corporation has been notified in	agree to act in es relative to th cept the obligat ct a change in th	e proper and comple ion of my position as he registered office a	registered –	
Trances	Wallack e of Registered Agent	April ,	, 2014		
Signature If signing on behalf		<u>- </u>	Date	_	
<i>U U</i>	•				
Typed	or Printed Name * * * FILING FEE	:: \$35.00 * * *	paid oc	5700	

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (03/12)